## For Finance Staff use only



## **Development and Environmental Services Department** 39550 Liberty Street, P.O. Box 5006, Fremont, CA 94537-5006 510 494-4440 information | 510 494-4443 appointments

WORK ORDER NUMBER:\_\_\_\_\_

Total Deposit Fee: \$\_\_\_\_\_\_

APPLICANT - PLEASE PRINT CLEARLY AND FILL IN ALL APPLICABLE SECTIONS	
PROJECT NAME: (one letter per box)	
PROJECT SITE ADDRESS:	
APN:	APN:
APN:	APN:
PROJECT DESCRIPTION:	
<b>APPLICANT:</b> Name and mailing address of person requesting the filing of this application.	MAIN CONTACT PERSON: Person to be contact other than applicant regarding this application.
NAME:	□ ARCHITECT □ ENGINEER
COMPANY:	☐ TENANT ☐ OTHER
ADDRESS:	NAME:
	COMPANY:
CITY/STATE/ZIP:	ADDRESS:
PHONE #: () FAX#: ()	CITY/STATE/ZIP:
E-MAIL ADDRESS:	PHONE #: () FAX#: ()
SIGNATURE:	E-MAIL ADDRESS:
PROPERTY OWNER AUTHORIZATION:	
	Upon three days prior notice by City of Fremont staff, I shall provide access to the subject site for City officials, staff, their agents, and consultants for the purpose of planning and development application review and inspection. Myself or my agent
NAME:	may accompany such persons while they access the site. If fail to respond to a request for access within three days, City officials, staff, their agents and consultants
COMPANY:	are authorized to enter onto the site for such review and inspection.  CHOOSE ONE:
ADDRESS:	☐ I am the sole owner and hereby authorize the filing of this application
CITY/STATE/ZIP:	I own the project site jointly with one or more persons and am empowered to authorize the filing of this application on behalf of my fellow property owners; or,
PHONE #: () FAX#: ()	□ I own the project site in conjunction with one or more persons who are listed with their acknowledgement and authorization for the filing of this application attached
E-MAIL ADDRESS:	for additional property owner authorization/acknowledgements.
	SIGNATURE:
BILLING AUTHORIZATION: Person responsible for payment of project charges.	NAME:
I agree that the application fee submitted with this application is a deposit only. If the application is modified, an additional deposit or deposits may be required. The	
actual charges for the application(s) and any subsequent modifications will be based on staff time required to process the application, including modifications and	COMPANY:
appeals. Progress billings will be made during the review of the project if charges exceed the deposit. Prompt payments of progress billings will assure continued staff	ADDRESS:
review of the project. I also agree that the denial of the project does not relieve me of the payment of charges for the processing of the application. I acknowledge I will be issued a refund at the completion of the project review if excess funds have been	CITY/STATE/ZIP:
paid.	PHONE #: ()
I further agree to pay all fees charged for the processing of this application and any subsequent modification based on the current fee schedule, which is in effect at the	E-MAIL ADDRESS:
time the work, is performed. Additionally, I authorize the City to offset any shortage in any other accounts I might have with the City with excess funds from this account. The City reserves the right to offset any shortage in other accounts.	SIGNATURE:

CASE #:
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		Staff use on	ly		
ADM  PRP *+  ZA – new application *  ZA Amend #  Lot Combo +  Lot Line Adjustment *  Mod *	\$1,700 \$ 850 \$ 600 \$ 600 \$1,200 \$ 200	APP  Appeals to Planning Commiss (Case No	\$ 750 \$	MIS CASE  □ Amusement Device □ Certificate of Compatibility * □ Conditional Use Extension * □ DEX □ HARB - Sign	\$ 50 \$ 100 \$ 350 \$ 200 \$ 225
DES  DES  DEM  DOL  HARB – Arch. Review *+  Prelim. Grading *+  Private Street *+	\$4,000 \$1,800 \$1,800 \$1,900 \$1,600 \$ 700	PUD  PUD – new application *+  PUD Amend *+  GEN  GPA *+  Finding - Land Use (Gen. Pl.)  DEV  Develop. Agreement  Develop. Agreement Review	\$2,500 \$3,000 \$2,400 )*+ \$1,250 \$1,450	□ Large Family Day Care a Public Hearing required a Public Hearing not required	\$ 450 \$ 150 \$ 100 \$ 200 \$ 200 \$ 225 \$ 225 \$ 300
☐ Use Permit – new application *+☐ Use Permit Amend *+☐ Finding – Architecture/Site *+☐	\$2,400 \$2,400 \$2,400	ANX  Ag Preserve: Cancel. *+  Ag. Preserve: New Contract *-	\$1,900 + \$1,900	PLN DEPOSIT FEE SUBTOTAL MIS FLAT FEE SUBTOTAL	\$
REZ  Plan. District Preliminary *+ Precise *+ Prelim. & Precise *+ Maj. Amend # *+ Min. Amend # *+  Rezoning *+  Zoning Text Amendment *+	\$1,000 \$2,300 \$4,800 \$3,000 \$1,500 \$1,600	OTHER  Certificate of Compliance *  Easement Abandonment *  Street Abandonment *  (Vest or Non-Vest) Tentative Parcel Map No *  (Vest or Non-Vest) Tentative Tract Map No *		TOTAL DEPOSITS AND/OR FLAT FEES \$	
VAR  Uariance	\$ 850	□ Tentative Tract Extension  Map No *  □ (OR LIST)	\$1,800  \$	* = CTCC Meeting recommended + = Applicant Meeting recommenden	ded
PREVIOUS ACTIONS AND APPLICATION NUMBERS:				-	
COMMENTS:					
ATLAS PAGE: 5C - 3		REVIEWED BY:   ADMIN	□ PC □ CC	REC. DATE:/_ BY:	_/
NOTIFICATION REQUIRED?  □YES □NO	BUFF	FER DISTANCE: _D FEET D MILE PROJEC	T MANAGER:		

CASE NUMBER:	

<u>DEVELOPMENT STATISTICS</u>

<u>Please print clearly and fill in all applicable sections</u>

SECTION 1: ZONING AND GENERAL PLAN INFORMATION	
a. What is the property currently designated for:	
ZONING:	
GENERAL PLAN:	
b. Are any changes being proposed to either the Zoning or General Plan? 🗖 NO 📮 YES. IF YES, list the new Zoning Distr	ict or,
General Plan designation(s) as appropriate	
ZONING: and/or	
GENERAL PLAN:	
SECTION 2: SIZE OF DEVELOPMENT AND NUMBER OF LOTS	
a. What is the total land area of the project site? □ SQ. FT./□ ACRES.	
b. How many lots does the project area currently contain? LOTS	
c. Do you propose to subdivide the project site and thereby increase the number of lots?   NO  YES If yes, are the to	otal
number of lots?lots	
d. Is the site currently vacant? □ NO □ YES.	
SECTION 3: HISTORIC INFORMATION	
a. Were any structures located on the project site constructed prior to 1956?  NO  YES – If YES, when was the structure	re built?
Year built.	
b. How is this structure being used?	
c. Describe generally where this structure is located on the project site?	
d. Is the site or any of the structures considered to be historically significant? ☐ NO ☐ YES.	
e. What type of historic designation? (check one) □ Federal; □ State; □ Landmark; or, □ Local	
f. Is the site or structures known by a particular name?  No Yes – If Yes, list its name –	
☐ Site ☐ Building	
SECTION 4: EXISTING RESIDENTIAL	
a. Does the project site currently contain any residential dwellings? □ NO □ YES.	
If YES, what is the total number of units?Units.	
b. Indicate the number of units by type: Single Family Detached; Single Family Attached; Townl	nouses:
Condominiums; Apartments	,
c. Are there any existing affordable housing units on the project site? $\square$ NO $\square$ YES. If YES, how many affordable housing	units does
the development contain? Affordable Units.	

		CASE NUMBER:
SE	SECTION 5: NEW RESIDENTIAL: PROPOSED OR CHANGES TO EXISTING	
a.	a. Do you propose to increase the number of affordable units? ☐ NO ☐ YE	S. – If YES, how many units? Affordable units
b.	b. Do you propose to add any new units to the project site? ☐ NO ☐ YES Single Family Detached; Single Family Attached;	**
	Do you propose to delete any residential units from the project??	**
SE	SECTION 6: RESIDENTIAL PARKING INFORMATION	
a.	a. How many COVERED parking spaces are currently being provided per c	welling unit? spaces
b.	b. How many UNCOVERED parking spaces per unit? spaces	
C.	c. Given the total amount of parking spaces being provided, list the number	of spaces by their types:
	COVERED:	
	UNCOVERED: ☐ No. of Standard;☐ No. of Compact; ☐ Handicapped Car; ☐ No. of Bicycle Spaces; ☐ No. of Other	
d.	<ul> <li>d. Are any changes being proposed to the number of available parking spaced decrease in the total number of spaces. ☐ Increased by spaces;</li> </ul>	
e.	e. Indicate the revised composition:	
	COVERED: No. of Standard; No. of Compact; Handicapped Car; No. of Bicycle Spaces; No. of Other	
	UNCOVERED: □ No. of Standard;□ No. of Compact; □ Handicapped Car; □ No. of Bicycle Spaces; □ No. of Other	
SE	SECTION 7: EXISTING NON-RESIDENTIAL	
	a. Are there any existing non-residential buildings on the project site? □ Note the buildings □ Sq. Ft.	Yes If yes, what is the combined total floor area of
b.	<ul> <li>b. Indicate which non-residential uses are currently existing on the project s</li> <li>□ Warehouse; □ Retail; □ Industrial R&amp;D □ Industrial Speculative Blo</li> <li>□ Hotel/Motel; □ Services; □ Other</li> </ul>	
C.	<ul> <li>c. Please provide the following information on existing land uses, where ap Institutions, Restaurants);</li> <li>□ Children (Child Day Care);</li> <li>□ Rooms (Hotel/Motel).</li> </ul>	

CASE NUMBER:	
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## SECTION 8: NEW NON-RESIDENTIAL: PROPOSED OR CHANGES TO EXISTING

a.	Are any new land uses being proposed for the project site?   NO  YES. If YES, Indicate which uses are being proposed – General Office;   Medical Offices/Clinics;   Hotel/Motel;   Retail;   Warehouse;   Services;   Industrial R&D   Industrial Speculative Bldg.;   Religious Institutions/Facilities;   Child Day Care;   Other
b.	Do you plan to add any new floor area?   NO YES - If YES, how much additional floor area? : Sq. Ft.
C.	Please provide the following information for the proposed uses, where applicable: Number of - □ Seats (Religious Institutions, Restaurants); □ Children (Child Day Care); □ Students (Schools); □ Beds (Residential Care Facilities); □ Rooms (Hotel/Motel).
d.	Are any uses being removed/deleted from the site? □ NO □ YES. If YES, indicate which uses are proposed to be removed/deleted - □ General Office; □ Medical Offices/Clinics; □ Hotel/Motel; □ Retail; □ Warehouse; □ Services; □ Industrial R&D □ Industrial Spec Bldg.; □ Religious Institutions/Facilities; □ Child Day Care; □ Other
e.	Do you plan to reducing the amount of floor area devoted for non-residential use?  NO YES - If YES, what is remaining amount of non-residential floor area? : Sq. Ft. of non-residential use.
SE	ECTION 9: NON-RESIDENTIAL PARKING INFORMATION
	What is the total number of parking spaces currently available for the project? Total spaces
a.	what is the total harmon of parking spaces currently available for the project:
	Given the number of available spaces, how many are:On-site; Off-site
b.	
b. c.	Given the number of available spaces, how many are:On-site;Off-site  List the number of existing parking spaces by their types: □ No. of Standard; □ No. of Compact; □ No. of Handicapped Van; □ No. of Handicapped Car; □ No. of Bicycle Spaces; □ No. of Motorcycle;